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TETANUS FROM A NEWLY INCISED WOUND.

[Communicated for the Boston Medical and Surgical Journal.]

I WAS called on Monday, the 8th day of April, to Robert Smith, a laborer, aged twenty-five years, whom I found in tetanic convulsions the most severe imaginable. His jaws were set so firmly that it was almost an utter impossibility to move them. His pulse was very full and bounding, but not frequent; his skin was covered with a gentle perspiration, and his pupils very widely dilated.

It appeared, upon inquiry, that he had, about two hours before my arrival, cut his foot upon the instep. The wound was not a severe one, not so much so as to excite any serious apprehension, or even to call his attention immediately to it. He continued at his work a few minutes after he had received the wound, and then went into the house to have it wrapped up; but whilst the bandage was being adjusted, he fell into the convulsions above described. His limbs and every muscle of the body, when I arrived, were in a state of rigid and most extreme extension, except at intervals of about every five minutes, when a slight relaxation in the muscles of the arms took place; but these remissions were of short duration, none of them continuing more than half a minute at a time. His legs and his neck at no time became in the slightest degree relaxed. His respiration was perfectly natural.

Finding him a man of a strong, robust habit, my first object was to take blood from the arm; but I was foiled in the attempt, as at the most I could make but a very little flow. I next had hot fomentations put to the abdomen and feet, and a cataplasm to the wound, after having filled it with spirits of turpentine. The limbs were rubbed briskly with spirits of camphor; ether was applied to the temples, the nostrils, and a few drops put into his mouth, whilst hot bricks were applied to the back. He continued in this state for about two hours, when his limbs became somewhat more relaxed, and he shortly came to his senses, so far as to be able to speak. At this time we were able to get a quart of blood, or more, from the arm, and the convulsions left him entirely. He continued to lie quiet for about two hours, when his jaws again became set, and his limbs as rigid as ever. I again took a pint of blood from the arm, made a free incision at the bottom of the wound, in order to cut off any wounded nerve that might there be found, and applied the powdered nitrate of silver to it, after being well dilated. We then commenced giving him brandy and opium alternately. Of the former we

gave four ounces every half hour, and of the latter five grains during the same time. Under this treatment he continued through the night with only slight convulsions occasionally. At eight o'clock the next morning, they again returned, when I once more bled him, gave a drastic purge, and continued the anodyne as usual. After this he had no more convulsions, and the next morning he was up and about. The wound is well inflamed, and begins to suppurate, with all the appearances of doing well.

This case, which I consider one of decided tetanus, is remarkable only for the time at which it came on, being immediately after the reception of the wound, and for the control which bleeding and stimulants possessed over it.

N. H. ALLEN.

Gray, Me., April 18, 1839.

FOWLER'S SOLUTION IN THE TYPHOID STATE OF SCARLATINA OR CANKER RASH.

[Communicated for the Boston Medical and Surgical Journal.]

HAVING, in the winter of the year 1836, in an epidemic of canker rash that prevailed quite extensively in the town of Rush, in this Co., witnessed the good effects of Fowler's solution in the typhoid state of the disease, and presuming it has never, or at least not generally, been resorted to in this frequently malignant and fatal complaint, and from your expressing a desire that some more successful plan of treatment might be adopted than that in usual practice, I am induced to report a case or two.

CASE I.—Adeline S., aged 12 or 13, of a decidedly strumous habit, flaxen hair, light-blue eyes, and fair skin, was suddenly attacked, after going to school all day and studying and playing with her usual vivacity, with chills and shivering, soon followed with burning heat, great thirst, nausea and vomiting. I soon saw her and gave an emetic of ipecac. followed by a purge of cast. oil, after which she was put upon a solution or infusion of ipecac. once in 3 or 4 hours, alternated with a solution carb. soda and spt. nit. dulce. Drink, cold water, acidulated with cremor tartar. The ipecac. increased so as to induce moderate vomiting, when there was great difficulty of breathing from the accumulation of viscid phlegm in the throat and fauces. The eruption commenced coming out on the 2d day, and on the 3d was very general over the whole body; the fever running very high, with intense heat of the surface, slight delirium at night, and urgent and constant thirst; considerable, though not very great congestion and soreness about the throat and mouth; the mucous membranes of the fauces and nose covered with the efflorescence; the middle of the tongue covered with a white coat, and the edges intensely red. About the 5th day the fever and efflorescence began to subside. There were a few small ulcers on different parts of the mouth and fauces. A gargle of blood-root, capsicum and muriate of ammonia, sweetened with loaf sugar, was used, and a similar preparation, with the addition of a little ipecac., was di-

rected to be taken once in four hours, with Dover's powder, if much heat of surface and restlessness, once in 5 or 6 hours, and especially at night.

On the 7th day we thought our patient so far recovered that we quit visiting her. On the 10th we were again called to see her. There was great prostration; the tongue red and dry in the middle, with a streak of coat on each side, the extreme edges and tip red and dry also; an appearance I have only noticed in a few cases. There was great pallor of countenance, with an occasional livid flush on the cheeks; the pulse frequent, quick and weak; surface dry, with considerable heat at times. We immediately put her upon the use of quinine and capsicum, the quinine in 3 or 4 grain doses once in 4 hours, and the capsicum once in 2 hours, a tablespoonful prepared after a formula quite similar to Eberle's, viz., R. 1 tablespoonful of red pepper, a teaspoonful common salt; beat together, to which was poured a half pint of boiling water; steeped, strained, and a gill of good vinegar added, and taken when cold. She continued, however, to sink; the quinine was increased from 4 to 5 or 6 grains, with carb. ammonia, and other diffusible stimuli, such as wine and brandy. Her case was now looked upon as hopeless, her friends frequently gathering round her bed to see her die.

At this time, the 14th day of the disease, my respected friend, Dr. Edson, of Scottsville, saw her. He advised to continue the quinine and wine, and in addition 10 drops of equal parts of paregoric and Fowler's solution. In the course of 24 hours there was an evident amendment. On the 3d or 4th day there was some desire for food. On the 7th or 8th, the fever and typhoid symptoms had entirely subsided. Considerable swelling of the eyes existed, caused by the solution; for it had been given constantly every 4 hours for 7 or 8 days, notwithstanding the patient at times had complained of severe pain at the stomach, with tenderness on pressure. She convalesced rather slowly for two or three weeks, during which time the cuticle peeled off from a considerable surface of the body; on the hands and feet it came off almost like a glove, and with it a number of nails from the fingers and toes. There was great swelling of the feet and legs from cedema. Towards the latter end of the 2d week of convalescence, symptoms of anasarca came on. During this time many of the articles recommended for dropsy were given, to no purpose; the legs were bandaged with a solution of muriate of ammonia in vinegar and water. We now put her on the use of the carb. iron $\frac{1}{4}$ oz., 2 drachms extract sarsaparilla, 3 drops oil of cinnamon, 2 oz. hot water, sweetened with loaf sugar. Dose 1 teaspoonful once in 6 hours, well shook before given. Three or four days after, I was sent for in great haste. The people had become alarmed on account of her voiding enormous quantities of urine in a few hours. Their fears were quieted by assuring them it was highly favorable, and what all along we had been trying to effect. She now very soon regained perfect health, and grew rapidly. In the fall of that year (1836) I left for this place, and did not again see my patient till the summer of 1837, some 14 or 15 months from her disease. She then was enjoying perfect health, and almost in the full blush and bloom of

womanhood—which fact I mention merely to show that no bad effects had ever followed the use of the medicine, which I believe saved her life, and which undoubtedly is the most powerful and abiding tonic known.

CASE II.—A girl of strumous habit, 5 or 6 years of age, under the care of my esteemed friend and former preceptor, Socrates Smith, M.D., was treated nearly in the same manner as case I. Both he and the child's friends looked upon the case as mortal. He directed 5 drops of a mixture as before; that is, one half paregoric and the other half Fowler's solution, once in 4 hours, with complete success. In fact, the mother declared to him, and afterwards, upon inquiry, to me, that before she gave the first dose, she sat holding the child in her lap, thinking every breath would be its last; that she gave the drops, and in less than ten minutes it roused up as from a sleep, got out of her lap and sat down in a little chair at her feet. To the truth of this I will not vouch, as I did not see it; but I believe it to have been so, for the neighbors as well as the woman attest its truth, and they are all very respectable. One thing, however, is positively certain—the child got well.

It will be noticed that emetics in the early stage of the first case were used. In fact I have, with Professor Cross, great confidence in them in the treatment of this disease, in all its forms and varieties; and with him I believe a great deal depends upon their proper selection, though I differ with him in regard to their administration, in some particulars. He seems to place his whole dependence upon their efficacy when given in sufficient quantities to vomit, and often repeated; whereas I believe equally as much or more depends upon their being given so as to produce constant and protracted nausea. When called to a case, my practice is to administer an emetic of ipecac. or emetic tartar, or ipecac. conjoined with sanguinaria Canadensis, sulph. zinc., or cupri, according to the condition of the system and the stage of the disease (which I shall presently describe). After their operation I should cause the bowels to be gently moved with castor oil, senna or salts, or rhei, or even with magnesia or manna in very young cases. I firmly and sincerely believe, from what I have seen of its effects, that the frequent and free use of calomel, as so highly recommended by Armstrong, Eberle, and almost every writer upon the subject, and so generally practised, is productive of more injury than benefit. For we all know that one of the specific effects of this article is to produce increased action in the glands and parts about the neck and mouth, and, when carried still further, engorgement and inflammation. The same effects are produced by this disease in a peculiar manner; that is, engorgement, inflammation, ulceration, and, in malignant cases, gangrene and mortification. Calomel, therefore, is not indicated, unless in cases of decided bilious temperament, and where there are well-marked signs of derangement or obstruction of the portal system. After the bowels are evacuated, the patient should be put upon nauseating doses of the tartrate or ipecac., once in 1, 2, 3, or 4 hours, according to the urgency of the case; and whenever the trachea, bronchia or lungs seem to be loaded and pressed with a collection of viscid phlegm, it should be thrown off by exciting vomiting,

either by increasing the dose, or, when not readily accomplished, owing to the system being habituated to its impression, by giving some other article, as ipecac., if using the tartrate or zinc, or cupri if the ipecac. Vomiting once or twice a day is usually sufficient. This course should be kept up till the fever and efflorescence abate. When typhoid symptoms make their appearance, it should be discontinued entirely in nauseating doses, though the more stimulating ones may be used in this stage, even to a late period, with great advantage as a gargle, for which we have the authority of Armstrong and Eberle.

The states of the system in which tartar emetic is indicated and will prove beneficial, are, 1st, where the temperament is bilious or sanguinobilious, and the age over 5 or 6 years. It may perhaps be given younger with safety and benefit. Under a year, however, it should never be given, being so liable, in such cases, to become unmanageable and produce fatal consequences. 2d, where the fever runs high, where the heat of the surface is intense, or, to use a vulgar expression, almost "sissing," for, "according to Currie and Willan, the heat of the surface has risen to 108 and 112 degrees of Fahrenheit's thermometer." 3d, where there is congestion, engorgement, or inflammation of the brain, lungs, or liver,* and especially the lungs.

What is the first great indication under these circumstances? Obviously to reduce and weaken the strength and force of the sanguiferous system, the heart and arteries, whose excessive action threatens such disorganizing and fatal consequences; and, 2d, to allay the intense heat of the surface. What more powerful in the first, after vomiting by the same means, than nausea, constant and protracted, from emetic tartar, save bloodletting, and that, I believe, is never beneficial in this disease, under any circumstances. And in the second, what more powerful to determine to the surface, to excite an action in the capillaries, and thereby allay the burning heat and dryness?

Where it is not indicated, and where ipecac. will be more useful, is, 1st, in young subjects; 2d, in decided strumous habits; 3d, where there are well-marked signs of gastric disturbance, or inflammation of the stomach from the first; 4th, when typhoid symptoms prevail. When there are malignant typhoid symptoms, the ipecac. should be conjoined with sulphate of zinc or cupri, or bloodroot, or these alone.

Were this plan of treatment generally adopted—emetics in the early and eruptive stage, and Fowler's solution in the low typhoid one, when that should occur (which would not be the case to anything like the extent which it is under the common course)—I do most solemnly believe that the ravages of this at times most malignant and fatal disease might be greatly lessened. It may be proper here to mention, that

* Even in recent cases of disease in this organ, I believe it will prove nearly, if not quite, as efficacious as calomel or mercury in any form, given in alternative or slightly nauseating doses, at short but regular intervals. When I commenced practice it was with strong prejudice against this article, but by hearing the lectures of Dr. William Tully, who, it is well known, thinks most of our diseases are of an atonic character, and do not require such powerful reducing effects as this article is capable of producing. But since I have been in full practice, my prejudice has given place to confidence. I do not say this in derogation of the man, for I have and do now yield him all the homage due to his age, talents and profound acquirements. While attending his lectures at Cambridge, Vt., I was his silent, though enthusiastic admirer. He gave of the article under consideration, the exact quantity and perfect account, as to its properties and powers, of any I have ever heard or read.

in the epidemic that prevailed in Rush, in 1836, only one patient died, and that a child 6 or 7 months old, before the eruption broke out, and before the disease was recognized, it being the first or one of the first cases.

In further corroboration of the emetic plan, I will mention that the disease prevailed the same winter in this town, Ogden, to something of an extent, under the care of my friend James H. Gillet, now of Springfield, Ohio, who depended almost entirely upon emetic tartar, and whose confidence in it is so great that he thinks he could cure the disease under whatever circumstances or modifications it might appear. He had 7 or 8 patients in one family, all down with it at once, three or four of whom it was thought by the neighbors, and by a consulting physician, could not live, but who finally recovered. This circumstance gave the greatest notoriety to his treatment. I have since become acquainted with the family. They are all of the sanguino-bilious temperament. I would remark, that soda, in some form, should be constantly used in this disease.

Yours, very respectfully,

Adams Basin, N. Y., April 1st, 1839.

GEO. C. HOWARD.

P. S.—Why do not some of your able and veteran practitioners write more for your valuable Journal? They might, with little trouble to themselves, communicate detailed and practical pieces on all the common forms of disease, such as we daily and hourly meet with, especially the whole tribe of chronic ones, which often confound, perplex and baffle us, and which entail an immense amount of suffering, a thousand fold greater than is caused by rare, nondescript cases, which only occur at long intervals, and which to a considerable extent fill all our medical papers, to the exclusion of those of very frequent occurrence. Where are Channing, Ware, Hayward, Miner, North, "Senex," Comstock, and a host of others that I could mention?

G. C. H.

MEDICAL INQUIRIES.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Dr. Peirson, in your number for April 3d, says—"Take, from the list of poisons in the article 'Toxicology,' in the excellent *English Cyclopaedia of Practical Medicine*, iodine, alcohol, garden lettuce, carbonic acid—is it not obvious that we can receive the action of these substances in certain quantities, without their specific effects being in the least degree developed? And yet a man may be narcotized by alcohol and asphyxiated by carbonic acid."

In reply to his question, I might answer in the negative. I might say it is not "*obvious*" that we can "receive the action" of either of the substances here named, without their specific effects being in the least degree developed. Need I refer a learned and eminent surgeon and physician to the case of those individuals who, having for some time breathed the fumes of lead in its deleterious forms, without apparent injury, tell us it does not injure them—or that of him, who, having been

bitten by a mad dog ten years before, gravely assures us that it has not poisoned him, and yet eighteen years afterwards dies of hydrophobia?

But my business is not so much to deny what has been either affirmed or doubted, as to propose a few inquiries. I do not expect they will be answered, as I have no claim on you or Dr. Peirson in this respect; though I should rejoice to find a reply to them in some future number, from either of you or from any other individual. I would, however, observe, in this place, that I do not exactly like to have so much stress laid on the word *poison*. It is time mankind were more rational than to use *doubtful* at all—I mean in health. The question should be, not, *what will be least hurtful*, but *what will be most useful*.

Is it true that the conservative principle—the *vis vite*—of the human system, has the power of controlling the action of poisons on that system, however small their quantity, even the poison of carbonic acid or garden lettuce, to such an extent that their deleterious effects will be, as Dr. P. affirms, “entirely prevented?” If so, where is the proof? Will the loose analogy of the action of heat and cold on the living system be deemed sufficient?

Is it not true that, as a general fact, the smaller the quantity of any poisonous substance introduced into the blood, or even into the stomach, the greater is its injury to the living system, in *proportion to its quality*?

If the last question should be answered in the negative, does it not devolve on him who makes the reply, to show where the dividing line is between *injury and no injury*? That is, if the *vis vite* can resist a drop or a grain of some deleterious substance, so as to prevent, completely, any evil effects to the living system, can it not resist two drops or grains? Can it not ten? Can it not twenty? Or if not, I repeat it, where is the dividing line between poison and no poison, in the application of substances, all of whose parts are alike foreign to the human system?

Yours, &c.

Boston, April 19, 1839.

W. A. A.

ERGOT IN PARTURITION.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—It is not my intention to eulogize this valuable medicine. Its character as an accelerator of parturition is sufficiently established, and any remarks of mine, in this respect, would be superfluous. I have used it, probably, in more than a hundred instances, and have *always* had reason to be satisfied with its operation. In fact, it has rarely, if ever, failed of producing the desired effect, in any of the cases in which I have administered it. I consider its action on the uterus, after labor has commenced, to be as certain as that of any cathartic medicine, which I have ever employed, upon the bowels. My object in writing this note is to say, that I do not think the precaution of keeping the ergot in an hermetically-sealed bottle or jar, or keeping it excluded from the air, as recommended by several late writers in the journals, and pharmacopologists, to be necessary. Nor do I think it necessary

to pulverize it only when used. I have purchased the article in quantities of more than a pound at a time, and have kept it for years in a wide-mouthed jar, covered with nothing but paper. I frequently pulverize an ounce or two at a time, and fill a small phial, which I always carry in my pocket case, as constantly as I do calomel and other cathartics; the rest of it I tie up in a paper and lay it in the jar with the unpulverized spurry grain, and whenever I have occasion to fill my phial I take it from that paper. That which I have now in my possession is four or five years old. I have used it frequently within a year, with good effect. Within a week I gave 20 grains of it in powder, the dose which I usually prescribe, to a patient who had lingering pains for 24 hours, one in from 20 to 30 minutes, but feeble and inefficient. In 15 minutes from the time I gave it, her pains came on, and never left her for more than 20 minutes, when she was delivered of a lusty child weighing ten pounds, in perfect health. This ergot had been pulverized nearly or quite a year, and had no other protection from the atmosphere than a piece of paper and a common cork. It appears to me that the above facts are worthy of consideration.

Deerfield, March 25, 1839.

STEPHEN W. WILLIAMS.

EFFECTS OF TOBACCO ON THE VOICE OF PUBLIC SPEAKERS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I find I am not alone in being surprised at the opinion expressed by Dr. Mauran, and apparently endorsed by yourself, of the necessity of tobacco for public speakers, to prevent the occurrence of the disease that has recently affected clergymen so extensively. I apprehend, my dear sir, that these opinions have been given upon few data, and without the reflection which is desirable for those whose views on this subject may have an extensive influence upon the habits of mankind.

If it is indeed true that one qualification for preaching the gospel should be the practice of a most disgusting and vicious habit—the use of a narcotic which is second only to alcohol in its deleterious effects upon health and morals—then, indeed, a new era of knowledge has commenced. The facts that have been presented to me in a practice of more than thirty years lead me to very different conclusions. The first clergyman that consulted me, many years ago, for this difficulty, had arrived at the age of fifty when the disease commenced. He had used tobacco from his youth upwards; he used it then, and afterwards, and I believe continues to use it till this time. He now enjoys comfortable health, but is unable to speak for any length of time. He left the desk long ago, in consequence of loss of voice.

Another clergyman, with talents of the first order, was obliged, at the age of thirty, to leave a people greatly devoted to him, in consequence of this affection of the voice. He was an inveterate chewer of tobacco, and I believe smoked the cigar also.

I am not confident what were the habits, in this particular, of the numerous patients who have applied to me for advice, or whose cases

have come to my knowledge ; but the impression is strong upon my mind that quite a large proportion used tobacco in some form. The effect of snuff upon the voice is proverbial, so much so that many are able to detect the habit by the voice alone.

The influence of tobacco upon health is certainly deleterious. There is no mistake in this matter. It deranges the nervous system and diminishes the tone of the stomach, in innumerable instances. A narcotic of such power as tobacco, which cannot be used in the minutest quantity by the uninitiated without the most disagreeable and often dangerous effects, the habit of using which cannot be established without difficulty and great caution, and when established, cannot be abandoned without severe suffering, great prostration, loss of appetite, gastric sinking and distress, which shows how nearly allied are its effects to those of alcohol, should never be prescribed without great caution. Indeed, I have supposed that it was the most ready and common stepping-stone to that use of spirituous liquor which leads to intemperance. Those who chew or smoke tobacco are rarely satisfied with water, or other insipid and tasteless drinks, else why should the bar-room and the grog-shop be the resort of the smoker ? I would not insinuate that all who use tobacco are lovers of strong drink, nor proscribe alcohol or tobacco as remedies in some forms of disease ; but I would be very cautious how I recommended either as preventives of disease. How many thousands have found an untimely grave by the use of brandy, wine, and other narcotics, used to guard against sickness or as remedies for chronic diseases !

Fully believing that the tendency of the use of tobacco is to promote, rather than prevent, the disease in question, I could not forbear to state my views on this *one point*, and may, at a time of more leisure, give you more at large the results of my observation on this active and dangerous narcotic.

One word with respect to the disease. I have been led to suppose that the modern practice of preaching in *vestries*, and thickly-crowded, close and warm rooms, and afterwards inhaling cold air while heated, had much to do in producing the new disease. Vestries are of modern origin, as places of religious worship ; the rooms are small and low, and, when filled with people, the air becomes exceedingly bad. The speaker, elevated above the audience, and often near the wall above, inhales none but contaminated air, unfit for the lungs, and highly stimulating to the organs of speech. In such an atmosphere, tending to paralyze his efforts, he is obliged to redouble his exertions. How often do candles burn dim in such rooms ; and how often, in spite of all effort, do both speaker and hearer become dull and languid ! This effect is doubtless the consequence of the inhalation of an atmosphere rendered deleterious by the exhaustion of the principle which supports life. I believe the disease in question often arises from the frequent repetition of this cause, by a preacher whose health is not firm, and whose constitution is not vigorous.

Yours, truly,

April 15th, 1839.

S. B. WOODWARD.

THE LATE PROFESSOR HUBBARD.

[The following biographical sketch of Thomas Hubbard, M.D., of New Haven, Ct., is from the Introductory Lecture of Dr. Knight, the successor to Dr. H. in the chair of surgery in the Medical Institution of Yale College.]

Upon the decease of Dr. Smith, the well-known and long-tried reputation of Dr. Thomas Hubbard, as a judicious and experienced surgeon, pointed him out as the proper person to fill the vacant professorship of surgery. He was chosen to that office in 1829, and filled it to the time of his death, with great and increasing reputation to himself and benefit to the institution.

In Dr. Hubbard we have another instance, added to the many which have preceded it, of a man raising himself to high and deserved eminence in a liberal profession, in the midst of an enlightened community, by great energy of character, unaided except by his own exertions.

He was born at Smithfield, near Providence, in Rhode Island, where his father resided as an inn-keeper, in the year 1776. While he was quite young the family moved to Pomfret, in this State, where the same occupation was pursued. When he was about sixteen years of age, his father having died, the care of the establishment, and the oversight of the concerns of the family, consisting of a widowed mother and several children, all younger than himself, devolved upon him. The duties which were thus thrown upon him, at a period of life when most young men are scarcely competent to take care of themselves, were performed with great judgment and skill, and evinced the same energy and decision which characterized him through life. At this time he acquired a fondness for agricultural pursuits, an employment which he continued with much gratification, until his removal to this place. What his early education was, I am not informed, though it is known that he pursued the study of the languages and of mathematics for a period, most probably a short one.

His professional instructor was Dr. Albigense Waldo, a surgeon of considerable reputation, who had acquired most of what he knew of the art by his practice in the army. Dr. Hubbard, however, derived the greater part of his knowledge from the diligent study of the best medical books, and from his own observation. He was a most diligent student, not only when preparing for his profession, but during his whole life. His library was a valuable one, especially in works on surgery, and his habit was to spend a portion of every day, even when engaged in a most laborious practice, in availing himself of the knowledge which it afforded. I have often heard him remark, that the physician who neglected his books would lose more by forgetfulness, than he would acquire by observation, and would be less skilful in his profession at fifty, than he was at thirty years of age. His written lectures bear the strongest marks of his great industry. He obviously revised with care every subject, each successive year, and at each revision added, in the form of notes and interlineations, the result of his reading and observation. This course of diligent study, aided by a strongly retentive me-

mory, stored his mind with the most valuable information. I know not the man whose knowledge of the best practice of the best surgeons is more intimate and exact.

Having prepared himself for his profession, he commenced the practice of it upon the death of his preceptor, Dr. Waldo, in the year 1795, before he was twenty years of age. He met with opposition at first, on account of his attempting to unite the practice of physic with that of surgery. It seems to have been the custom of that part of the country, as it had been extensively elsewhere, for the surgeon to confine himself to that branch only, and to call in the aid of a physician when it was thought necessary. This plan Dr. Hubbard always reprobated, believing that the union of the two professions in the same person was better suited to the wants especially of a scattered population. Whatever opposition there was, seems soon to have subsided. His practice became extensive and very laborious, reaching not only all the eastern parts of the State, but also the bordering towns of Rhode Island and Massachusetts. There is the fullest proof of the success of his practice, especially in surgery. His qualifications as a surgeon were of a high order. Though not early instructed in anatomy, he was in the constant habit of dissection, and thus gained the requisite anatomical knowledge. He was prompt and decisive in forming an opinion of the cases which were presented to him, and equally so in advising and performing such operations as he deemed necessary. His vigorous and well-trained intellect, enlightened by long experience, grasped the strong points of a case, both as they were at the time, and as they would become if neglected. He always advocated an early resort to surgical operations, not timidly and hesitatingly waiting until its necessity might be more obvious, at the expense of the health and perhaps the life of the patient. In operating, he was cool, deliberate and collected.

The same promptness and energy which marked his character as a surgeon, controlled his practice as a physician. Employing but few remedies, and those of an active kind, he was thoroughly acquainted with their effects, and used them with great judgment and skill. He had great confidence in the remedial power of active medication. The object at which he aimed was to break up disease in its forming stage, or to control it by agents stronger than itself. This trust in the power of remedies he was in the habit of expressing strongly to his patients, and thereby secured that confidence on their part, which is so efficient an aid to the physician in the cure of diseases.

His energy and promptness sometimes gave a degree of peremptoriness to his manner, which, if untempered by kindness, might have been unpleasant. This was seen, however, to be prompted by the desire to enforce a strict observance of that course of treatment which he knew was for the benefit of the patient, and as such was duly appreciated.

In his intercourse with his patients, he was frank and undisguised, and entirely above those little tricks and concealments which indicate a weak or dishonorable mind. The same frankness also marked his conduct towards his professional brethren, and all others with whom he associated. The free expression of opinions uprightly formed, he be-

lieved to be the right and the duty of an honest man; a right which he claimed for himself, and to the exercise of which by others he was unusually tolerant.

During the thirty-four years which Dr. Hubbard spent in Pomfret, his time was fully employed in the faithful discharge of his professional duties, as well as those which devolved upon him as a good citizen, and a kind and upright man.

He was several times chosen Representative and once Senator in the Legislature of the State. He was also appointed President of the Connecticut Medical Society, and held the office until he declined a re-election. He was active in the promotion of such institutions as were designed for the benefit of the afflicted. The Asylum for the Deaf and Dumb, the Retreat for the Insane, and the State Hospital, each in its turn received his efficient aid. In the last year of his life he was active, under the authority of the Legislature, in procuring information, and in devising plans preparatory to the establishment of a hospital for the insane poor. The fatigue and exposure, while on a journey connected with this object, appeared to excite the disease which terminated his life.

In the year 1829, Dr. Hubbard removed from Pomfret to this place, and assumed the duties of professor of surgery in this institution, and for nine years he performed these duties with great zeal, industry and success. As an instructor he was plain, simple, straight-forward, abounding in correct principles and illustrative facts, without any attempt at the niceties of style or the graces of manner. Unbewildered himself by theoretical discussions, he spent no time in making theories of his own, or in marring those of others. His remark was, that if young men were desirous of theories, they could find enough of them in the books, and that his business was to teach them, by facts, how to distinguish and cure diseases. Possessing a memory wonderfully retentive, he embodied the accumulated facts and the rich experience of his professional life in the course of his instructions, thus giving them authority and force. His lectures were highly useful, and deservedly acceptable.

His life while here was one of usefulness and honorable exertion. Assiduous and kind in his attendance on the sick, punctual to all his engagements, resigned under many afflictions, cheerful and instructive in his conversation, affectionate to his family and familiar friends, and just to all men, he gained the respect and confidence of the wise and the good. Dr. Hubbard was through life an upright and a virtuous man. During the last years of his life, he thought much upon religious subjects, and his reflections, as we have reason to believe, under the divine guidance, led him to embrace the truth and the faith of the gospel. This faith he professed by joining himself to the communion of the Episcopal Church in this city.

He died June 18, 1839, of a disease of the stomach and bowels, of which he had previously suffered several severe attacks.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, APRIL 24, 1839.

TRANSACTIONS OF THE MEDICAL SOCIETY OF THE STATE OF NEW YORK.

PART II. of Vol. IV. for 1839, by the politeness of some unknown correspondent, has been received. It is extremely gratifying to perceive the harmonious and energetic vigilance of this Society, spread over an extent of territory equal to some of the kingdoms of Europe. The annual meeting was held at Albany on the 5th of February. Laurens Hull, M.D., was elected President; Sumner Ely, M.D., Vice President; Peter Van Olinda, M.D., Secretary; and Platt Williams, M.D., Treasurer. It was resolved that the prize question of last year be continued, and considered as offered for next season; and the prize question for 1840 is, "The diseases of the spinal column, their causes, diagnosis, history, and best method of treatment"—for which \$100 is offered for the best dissertation. A resolution was submitted by the Rensselaer Subordinate Association, stating it as their opinion that the present term of study was too short, and requesting that the subject might be brought before the Legislature, praying for the extension of the term of study one year. Another resolution was, that the increase of medical schools in the State was not inconsistent with the true interests of the profession, provided they are placed under proper restrictions and responsibilities—which evidences a spirit of liberality highly creditable to the Society.

The president's address on *quackery*, is a short paper. Another paper on suicide and its increase, at the present day, translated from the German of Professor Casper, of Berlin, by Dr. H. B. Webster, will be read with mingled feelings of surprise and interest. Statistics of the Medical Colleges of the United States, by T. Romeyn Beck, M.D., has all of that accuracy of detail, and, consequently, weight of authority, which distinguish that gentleman's writings—and which have given him a distinction as wide as the boundaries of the English language.

There is one single fault which we cannot refrain from pointing out, that savors of a certain degree of illiberality which could hardly be expected in a body of scientific men, so generous in every other respect. "No person coming from another State or country, shall practice physic or surgery in this State until he shall have been examined and licensed by the Censors of the State Medical Society." Now it strikes us that a diploma from any of the medical colleges, universities or medical societies of other States, should be received as unquestionable evidence of the qualifications of an emigrant physician.

It was proposed that a medical convention should be held the first Tuesday in May, 1840, in the city of Philadelphia, to consist of three delegates from each State Medical Society, and one from each regularly constituted medical school in the United States—which we shall probably refer to hereafter.

The manner in which the county societies are organized is certainly an admirable system, that might be copied to advantage in other States. Finally, we are desirous of expressing the pleasure we have derived from a perusal of these transactions.

Transylvania Medical School.—A gentleman for whom we entertain the most perfect respect—though we have never had the pleasure of a personal acquaintance—writes us from Philadelphia that a paragraph inserted in the *Journal* a short time since, respecting the above-mentioned school, copied from a western paper, was calculated to injure the reputation of the institution; "but had you stated," he says, "the name of the paper in which it originated, no injury could be done by the article, among those who know the state of the policy existing in the minds of the editor of that paper, and those who write for it. The article was from the *Louisville Journal*, and justice demands that you should, in a short paragraph, state that fact in your next number. That will be sufficient to avert its injurious tendency." Nothing gives us more satisfaction than to remove false impressions; and our correspondent, if he is as just and impartial as we intend to be in all that relates to medical science and the prosperity of medical schools in the United States, must have discovered that we firmly vindicated the character of the *Transylvania Medical College*, in the same article, against the insinuations of an enemy. We do not hesitate to declare, most frankly, that so far from being on the decline, there is every indication of increasing usefulness and vigor in that oldest medical school of the West. The splendid endowment of the city of Lexington, just made, of \$45,000 for the purpose of increasing the already large library, apparatus and museum, and for raising a new edifice, gives it a power of which its friends may be proud, and its enemies alarmed at. There is nothing like a sickly condition in all these energetic movements. Dr. Robert Peter, one of the professors, favorably known to men of science everywhere, is now on his way to Europe on the business of the college. These facts are presented to the professional public with peculiar pleasure, and it is sufficient, we trust, to exonerate us from any implication of having felt the remotest degree of hostility towards the *Transylvania* institution.

New York Quarterly Journal of Medicine and Surgery.—A prospectus of a new periodical, in the city of New York, with the foregoing title, has been received, from an anonymous source. We profess the most hearty good will towards the enterprise, but protest against the imposition of being taxed eighteen cents postage for the prospectus. If it had been a document of any value, a word of complaint would not have been uttered; but to compel us to pay for a piece of intelligence that arrives by the mail, day after day, is abominable. We are continually paying out for duplicate papers, pamphlets, circulars, notices of subscribers' removal, &c., far more than we are actually able to bear.

Having vented this amount of spleen, we respectfully present the claims of the new quarterly to the profession of the United States. Unfortunately for its first set-off, it is minus the name of an editor. Should it prove in the sequel that Dr. Doane controls its destiny, it will probably flourish, because he is a man of industry. George Adlard, 168 Broadway, is the publisher.

The prospectus says—"The contents of the *Journal* will be, for the most part, original: consisting of memoirs, essays, cases, and other communications that are, from time to time, read before the medical societies of this city; of similar articles from other sources; of the minutes of said societies, when of sufficient importance to be made public; and of lectures and occasional discourses. A portion of the work will be appropriated to biographical notices, and to important medical intelligence; but it shall in

no wise be so burdened with extracts from other publications, as to enervate its distinctive character; it shall continue independent of our medical colleges, and above all party and sectional influence. The Journal will be issued quarterly, commencing on the first of July next. Each number will contain 240 pages, forming two volumes annually. The subscription price will be five dollars a year, payable always in advance."

Speaking of journals—what has become of the magnificent scheme for a New York Lancet with its 800 advance-paying subscribers?—If the medical associations in the city of New York really desire the prosperity of the quarterly, as professed in the circular, the editor of the late Medical Examiner should be at once secured. A man of vigorous movements, always animated, and always just and impartial in his intentions, must have the helm, or the whole concern will be in ruin before 1840. If there is more than one editor it will prove a sinking ship. There cannot be two masters on board the same vessel in joint command.

University of Pennsylvania.—The medical class in this institution for the session 1838-9 numbered four hundred and two students.

At a public commencement, held April 5th, 1839, the degree of Doctor of Medicine was conferred by the Rev. Provost, John Ludlow, M.D., on one hundred and forty-six gentlemen. An eloquent and impressive charge was delivered by Professor Chapman.—*Medical Examiner.*

Blue Pill.—Sir.—Can you, or any of your correspondents, tell why the preparation called "blue pill," is so often preferred to calomel? Is it not an unscientific preparation, and therefore one which ought to be discarded in practice? So far as my experience extends, I am not aware that it possesses any advantages over calomel, for I confess I cannot tell wherein their operations differ. If it possesses any advantages as a remedial agent, it ought to be employed; if not, the one most convenient would commend itself to all.

JUVENIS.

Medical Miscellany.—Mr. Combe has completed another course of lectures at Philadelphia.—Mr. Fowler, the phrenologist, took a cast of the head of a boy, in Boston, last week, only nine years of age, which measured twenty-five inches in circumference—exceeding the average of adult craniums by about two inches.—Mr. Combe is now giving a second course of his invaluable lectures on phrenology and moral philosophy, at New York.—Dr. Isaac P. Vaughan, charged with the murder of Walter H. Pleasants, at Richmond, Virginia, has been acquitted.—Professor N. C. Kamper died at Amsterdam, on the 15th of March.—Joseph Benton, a revolutionary soldier, in the 108th year of his age, recently received a pension for past services.—Dr. Buisson, of Paris, is said to have discovered an antidote for hydrophobia—which consists of a vapor bath, heated to 126 degrees of Fahr.—No. 7 of the Phrenological Journal has been enlarged 16 pages—an excellent and cheap periodical, being \$2 per annum.—Dr. J. B. Gale, of Amesbury, Mass., has invented a new and admirable tooth key, called the compound tooth instrument, a beautiful piece of workmanship—a specimen of which may be seen by calling on the editor. A distinct paper will be devoted to this invention as soon as there is room in these pages. A specimen may also be seen at Metcalf's, Tremont Row, where it is soon to be on sale.

TO CORRESPONDENTS.—Dr. Comstock's valuable essay on *Scarlet Fever* will be reserved for the first No. in May, in which it will be commenced. Other papers are on hand.

Died.—In Leicester, Mass., T. Mather Clapp, a medical student, 19.—In Madison, N. H., Dr. Morgan.—In Social Circle, Geo., Dr. David Day.—At Philadelphia, Edward Gardner Davis, M.D., son of the late Jonathan Davis, Esq., of Boston. He was a graduate at Harvard University, in the Class 1820. While he had a mind capable of grasping the most abstruse problem of the exact sciences, he was an excellent linguist and a finished belles-lettres scholar. Amiable in disposition, and modest and unassuming in manners, he won the esteem and respect of his classmates, and of all others with whom he was associated. For several years past he has been engaged in practice, as a physician, in Philadelphia.

Whole number of deaths in Boston for the Week ending April 26, 27. Males, 18—females, 14.

Of consumption, 4—rheumatic fever, 1—inflammation of the lungs, 1—canury, 1—scarlet fever, 7—typhoid fever, 1—disease of the heart, 2—debility, 1—dropsy on the brain, 1—insanity, 1—paralysis, 1—hooping cough, 1—stillborn, 1.

NOTICE.

A PHYSICIAN in Grafton Co., N. H., of fifteen years' experience, wishes to exchange residence, to make collections and better his family. Undoubted reference as to character and professional merit can be had at this office. Partnership with a person wishing to retire from the laborious duties of the profession would be acceptable.

A 24.—cop5w

DR. HULL'S UTERO-ABDOMINAL SUPPORTER.

This new instrument for the radical cure of Prolapsed Uteri, or Falling of the Womb, by external application, superseding the use of the objectionable pessary, is confidently recommended to the public as the means of a perfect restoration to health, it never having failed of performing a cure, even under the most aggravated circumstances. It has received the decided approbation of Sir Astley Cooper, of London; Sir Benjamin O. Brodie; Sir James Clark, Physician to the Queen; Dr. Ashwell, Lecturer on Midwifery to Guy's Hospital; Dr. Rigby, Lecturer to St. Bartholomew's; Dr. Griffith, Lecturer to Westminster Hospital; Dr. Ramsbotham, Lecturer to London Hospital; Robert Ferguson, Lecturer to Westminster Lying-in Hospital; Dr. Sventanus, Lecturer to Midwifery Hospital, and Senior Accoucheur to Queen Charlotte's Lying-in Hospital; also by Henry Devlin, Connecticut; Studdell, Lee, Morrison, Surgeon Genesee, &c.; by John Leitch, President of the Académie Royale de Médecine, Paris, and Accoucheur to the Duchesse d'Orléans; Professors Velpeau, Maréchal, Paul Dubois, Gannou, and others—and in New York by Professor J. W. Francis, G. S. Bedford, M.D., Professor of Midwifery in University of the city of New York; Professor (University) Francis O. Johnston, President County Medical Society; Langdon, President Medical Society of New York; Professor James McNaughton, Albany; Dr. March, Professor of Obstetrics, Professor Deane; James Webster, M.D., Professor of Anatomy and Surgery, Geneva; David L. Rogers, Professor Surgery, Geneva College; Drs. Thomas Boyd, Gilbert Smith, Henshaw, Stearns, Ludlow, Kinsam, Vache, Fowler, Grayson, Van Kesselmeer, and many other distinguished physicians of the United States.

AMOS G. HULL, Office 4 Vesey Street, Astor House, New York.

A constant supply of the above instruments will be kept by Reed, Wing & Cutler (late Lowe & Reed), No. 54 Chatham street, Boston. Lowe & Reed have sold many of the above instruments and can refer to physicians of eminence by whom they have been highly approved, as well as to patients to whom they have afforded the most essential relief. Price \$16. Feb. 13.—6m

PRIVATE MEDICAL INSTRUCTION.

Two subscribers are associated for the purpose of giving a complete course of medical instruction. Their pupils will have regular access to the medical and surgical practice of the Massachusetts General Hospital. They will be admitted, also, to the practice of the House of Correction, which constantly presents a large number of important cases, and where opportunities will be afforded for acquiring a practical knowledge of compounding and dispensing medicines. They will be furnished with opportunities for the study of Practical Anatomy, not inferior to any in the country. To the pupils, particularly to those in the last year of their professional studies, facilities will be afforded for seeking a personal acquaintance with private medical and obstetric practice. Instruction by examinations or lectures will be given in the different branches of medical studies, during the interval between the public lectures of the University. Books, and a room with fire and lights, will be furnished to the students at the expense of the instructors.

GEORGE C. SHATTUCK,
WALTER CHANNING,
JOHN WARE,
GEORGE W. OTIS, JR.,
WINSLOW LEWIS, JR.

Oct 31—optf

TO PHYSICIANS.

A PHYSICIAN, residing a short distance from Boston, wishing to retire from professional business, offers his estate for sale, which consists of good buildings and a small farm. The situation is as eligible for a physician as can be found in the State. For particulars, inquire at this office.

A. 10—54*

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